

**STATE OF IDAHO
DIVISION OF BUILDING SAFETY
ELECTRICAL BUREAU, LICENSING SECTION
1090 E. WATERTOWER ST.
MERIDIAN, ID 83642
(208) 334-2183
dbs.idaho.gov**

APPLICATION FOR JOURNEYMAN ELECTRICIAN LICENSE

In order to be approved for the Idaho State Journeyman Electrician exam you must submit notarized documentation of four (4) years (a minimum of 8,000 hrs) of work experience as an **apprentice electrician** making electrical installations under the constant supervision of a qualified journeyman electrician **and** four (4) years (a minimum of 576 hrs) of approved electrical apprenticeship class room instruction.

An applicant with **out-of-state experience**, who has not completed the education requirement, may alternatively submit twice the amount of experience (eight years defined as 16,000 hrs). The work experience shall include three (3) categories, residential, commercial, and industrial. Experience shall not exceed seventy-five percent (75%) of the work time in any one category. If the applicant *does not meet the 16,000 hour requirement*, he or she may register as an apprentice electrician, and may be approved for placement testing for the required classroom instruction based on their out-of-state work experience.

A person holding an active Idaho journeyman electrician license may make installations of electrical wiring and equipment as an employee of an active licensed Idaho electrical contractor. Anyone attempting to act as an electrical contractor in the state of Idaho must first obtain an Idaho electrical contractor's license.

TESTING: An applicant for testing must submit an application to the Electrical Bureau. Upon application approval, the Electrical Bureau will issue an **examination registration form** to the applicant, which must be completed by the applicant and submitted to the testing service.

RECIPROCITY: Idaho has journeyman electrician licensing reciprocity with the states of **Oregon and Montana**. If you tested for your journeyman electrician license in either of the above states, you may be eligible for licensing reciprocity. Please include a copy of your **current** Oregon or Montana journeyman license with this completed application.

FEES: **A \$15 administrative fee** must accompany this application, whether applying to test or to reciprocate. If an applicant for testing does not take the examination within sixty (60) days of Bureau approval, he/she must reapply to the Electrical Bureau and resubmit the \$15 fee. Payment to the Electrical Bureau may be made in the form of personal check, money order or cashier's check.

Upon passing the examination, applicant may submit the \$55 journeyman license fee payable to the Electrical Bureau. **Applicants for reciprocity may include the \$55 license fee with the application.** (*Applicants failing to purchase a license within ninety (90) days of the date of successful examination shall be required to reapply for licensure, again obtain the Bureau approval and re-examine.*)

**PLEASE MAIL THE COMPLETED APPLICATION, A PHOTOCOPY OF YOUR PICTURE
IDENTIFICATION, AND THE \$15.00 ADMINISTRATIVE FEE TO ADDRESS ABOVE**

FOR ELECTRICAL BUREAU
USE

APPROVAL: _____
DATE: _____

STATE OF IDAHO
DIVISION OF BUILDING SAFETY
ELECTRICAL BUREAU

APPLICATION FOR JOURNEYMAN ELECTRICIAN LICENSE

_____ **TESTING**

_____ **RECIPROCITY**

(Applicants For Reciprocity with the State of Oregon Must Enclose A Copy Of Their Current Oregon License With Their Application)

Name: _____

Social Security Number: _____ Telephone Number: _____

E-Mail Address: _____ Cell Phone Number: _____

Mailing Address: _____
Street, Box, or Route City State Zip Code

Have You Ever Had an Electrical License?

_____ No _____ Yes: Location: _____ Type or Grade: _____ In force from: _____ to: _____

Was License Obtained by Examination? No _____ Yes; _____ Date: _____

Address When Tested: City: _____ State: _____

Have You Previously Taken an Exam for an Electrical License by the State of Idaho? _____ No _____ Yes

Have You Previously Made Application for a State of Idaho Electrical License? _____ No _____ Yes

Have You Ever Served an Electrical Apprenticeship? _____ No _____ Yes

Apprenticeship Served With: _____

Address: _____
Street, Box, or Route City State Zip Code

From: _____ To: _____
(Month/Day/Year) (Month/Day/Year)

THIS APPLICATION MUST BE SIGNED AND NOTARIZED

I, _____, being first duly sworn, do hereby certify that the above statements are true and correct.

Signature of Applicant

THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC

Subscribed And Sworn To Before Me This _____ Day Of _____, 20 _____

NOTARY PUBLIC FOR: _____

COMMISSION EXPIRES : _____

STATE OF IDAHO
DIVISION OF BUILDING SAFETY
ELECTRICAL BUREAU

ELECTRICAL EMPLOYMENT RECORD
APPLICATION FOR JOURNEYMAN ELECTRICIAN LICENSE

NOTE: Applicants for testing must provide the Electrical Bureau with **notarized letters of verification of employment from each employer**, including the complete address of said employer to process your application, unless this information has already been provided to the Bureau through registration in the Idaho electrical apprenticeship program. To be credited for electrical experience gained in military service, you must include a copy of your DD-214 with this application.

IF PRESENTLY LICENSED WITH ANOTHER STATE, YOU MUST ENCLOSE A COPY OF YOUR CURRENT LICENSE

Present Employer: _____ Telephone Number: _____

E-Mail Address: _____ Fax Number: _____

Address: _____
Street, Box, or Route City State Zip Code

Type of Work, (Be Specific): _____

Dates Employed From: _____ To: _____
(Month/Day/Year) (Month/Day/Year)

Previous Employer: _____ Telephone Number: _____

E-Mail Address: _____ Fax Number: _____

Address: _____
Street, Box, or Route City State Zip Code

Type of Work, (Be Specific): _____

Dates Employed From: _____ To: _____
(Month/Day/Year) (Month/Day/Year)

Previous Employer: _____ Telephone Number: _____

E-Mail Address: _____ Fax Number: _____

Address: _____
Street, Box, or Route City State Zip Code

Type of Work, (Be Specific): _____

Dates Employed From: _____ To: _____
(Month/Day/Year) (Month/Day/Year)

STATE OF IDAHO
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ELECTRICAL BUREAU

EMPLOYER'S VERIFICATION FORM
APPLICATION FOR JOURNEYMAN ELECTRICIAN LICENSE

THIS PAGE MAY BE COPIED AS NECESSARY FOR MORE THAN ONE EMPLOYER.

Applicant Name _____

Dates of Verification: _____
From: _____ To: _____

Total hours doing electrical work for this employer for the time period noted above: _____

Type of Work: Residential _____
Industrial _____
Commercial _____

THIS APPLICATION MUST BE SIGNED AND NOTARIZED

This work was performed under the direct supervision of:

Supervising Journeyman Electrician: _____ License Number: _____

Name of Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

Fax Number: _____ Telephone Number: _____

Electrical Contractor License Number: _____

Signature _____
(Electrical Supervisor of the Electrical Contractor's License)

THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC

Subscribed And Sworn To Before Me This _____ Day of _____, 20 _____

NOTARY PUBLIC FOR: _____

COMMISSION EXPIRES: _____